

# **CHANGE OF CORRESPONDENCE ADDRESS Application**

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Application Number	10/758,849
Filing Date	1/16/04
First Named Inventor	Chambers
Art Unit	
Examiner Name	
Attorney Docket Number	7-5-1-8

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☐ Assignee of record of the entire interest.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ Attorney or Agent of record. Registration Number 30810

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number

Typed or Printed Name Werner Ulrich

Signature Werner Ulrich

Date 9/28/04

Telephone (630) 469 3575

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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	Filing Date	1/16/04	
	First Named Inventor	Chambers	
	Group Art Unit		
	Examiner Name		
Total Number of Pages in This Submission	2	Attorney Docket Number	7-5-1-8

ENCLOSURES (check all that apply)		
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<input type="checkbox"/> Extension of Time Request	<input checked="" type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Werner Ulrich
Signature	Werner Ulrich
Date	9/28/04

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